Provider: Attachment #2

Reporting Period:

DSS Community Behavioral Health

SCHEDULE A - EXPENSES	Support Services				Program
		··	Admin and	Fund	
	Total	Adjustments	Support	Raising	
Account Number and Title					
1000 PERSONNEL SERVICES:					
1010 Administrative	0				
1020 Professional/Program Staff	0				! ! !
1040 Support Staff	0				! ! !
1050 Client Wages	0				
1060 Temporary Staff	0				i
TOTAL PERSONNEL SERVICES	0	0	0	0	0
1100 PERSONNEL BENEFITS AND TAXES:				 	! ! !
1110 Retirement Plans	0				
1120 Insurance Benefits	0				
1130 Other Benefits	0				i
1140 FICA Taxes	0				i
1150 Unemployment Insurance	0				i
1160 Worker's Comp. Insurance	0				i !
1170 Prof. Liability Insurance	0				l
1190 Other	0				<u> </u>
TOTAL PERSONNEL BENEFITS AND TAXES	0	0	0	0	U
1200 PROF FEES & CONTRACT SVCS:					
1210 Administrative/Financial	0				i
1220 Habilitation/Rehabilitation	0				i
1230 Medical=	0				i !
1231 Other Medical (Dental, Dietary, OT, PT,					
Optometric, Pharmacy, Speech Pathology and					
Audiology) 1237 Physician/Nursing Services	0 0				! !
1237 Friysician/Nursing Services	0				
1290 Other	0				
TOTAL PROF FEES & CONTRACT SVCS	0		0	0	0
1300 TRAVEL/TRANSPORTATION:	0				i
1390 Other	0				
TOTAL TRAVEL/TRANSPORTATION	0		0	0	0
1400 SUPPLIES:	-	-	-	_	<u> </u>
1440 Food	0				i
1490 Other	0				! !
TOTAL SUPPLIES	0		0	0	0
1500 OCCUPANCY:					
1510 Rent of Space	0				
1520 Utilities & Telephone	0				
1590 Other	0				i i I
TOTAL OCCUPANCY:	0	0	0	0	0
1600 EQUIPMENT:	0				
1700 DEPRECIATION:					i
1710 Building	0				
1720 Equipment	0				
TOTAL DEPRECIATION	0		0	0	0
1800 MISCELLANEOUS:					<u> </u>
1810 Clothing	0				! ! !
1860 Bad Debt	0				
1890 Other	0				† !
TOTAL MISCELLANEOUS	0		0	0	0
Expenditure Subtotal	0	0	0		0
Admin. and Support Allocation		N/A		0	0
TOTAL EXPENDITURES	0				
					: